

NEBRASKA CONTINUOUS QUALITY IMPROVEMENT (CQI)



Child Protection & Safety

Tribes (Omaha, Ponca, Santee Sioux and Winnebago Tribes)

Our Vision: Children are safe and healthy and have strong, permanent connections to their families.

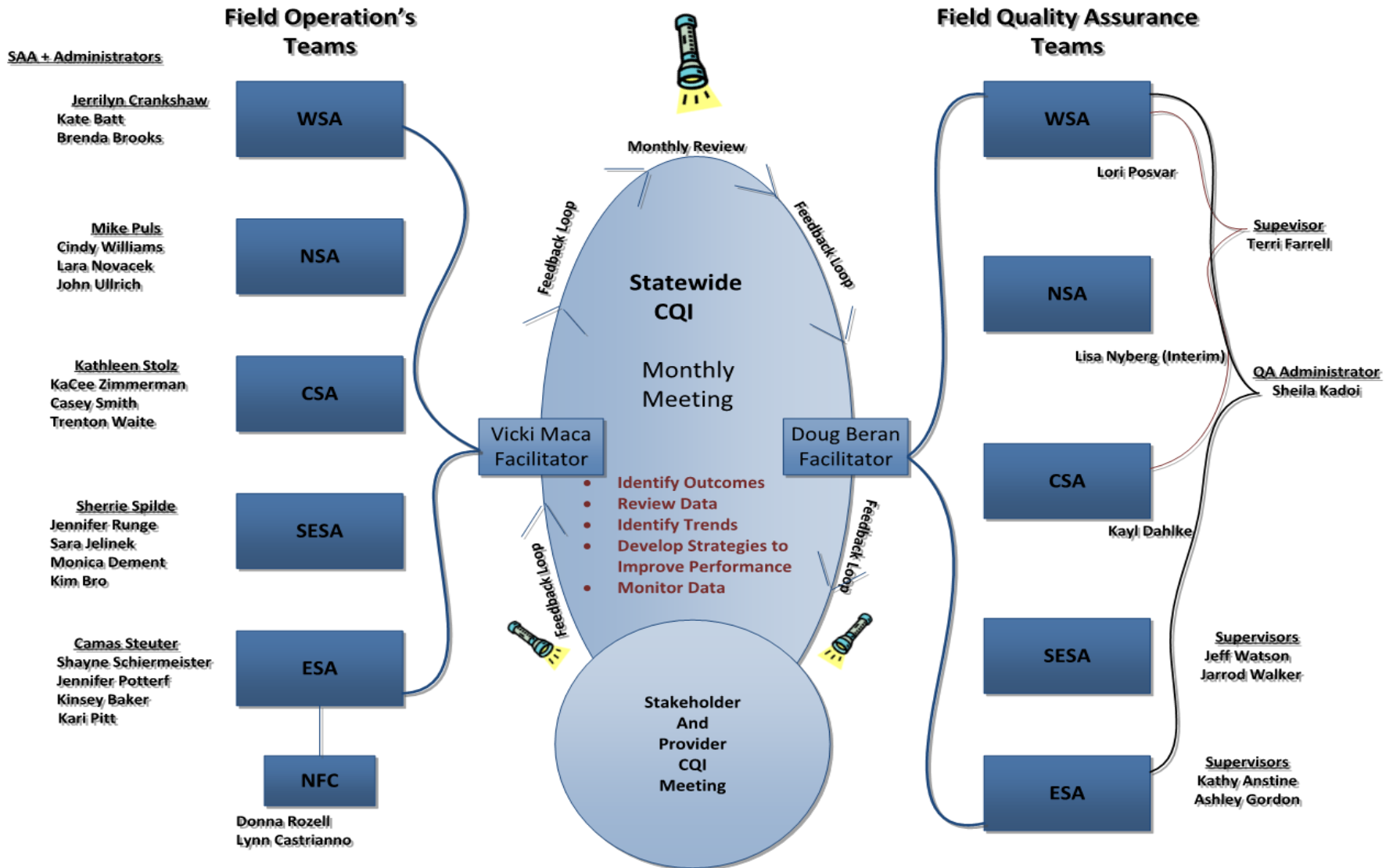
Our Commitments:

1. Children are our #1 priority
2. We respect and value parents and families
3. We value partnerships
4. We are child welfare professionals

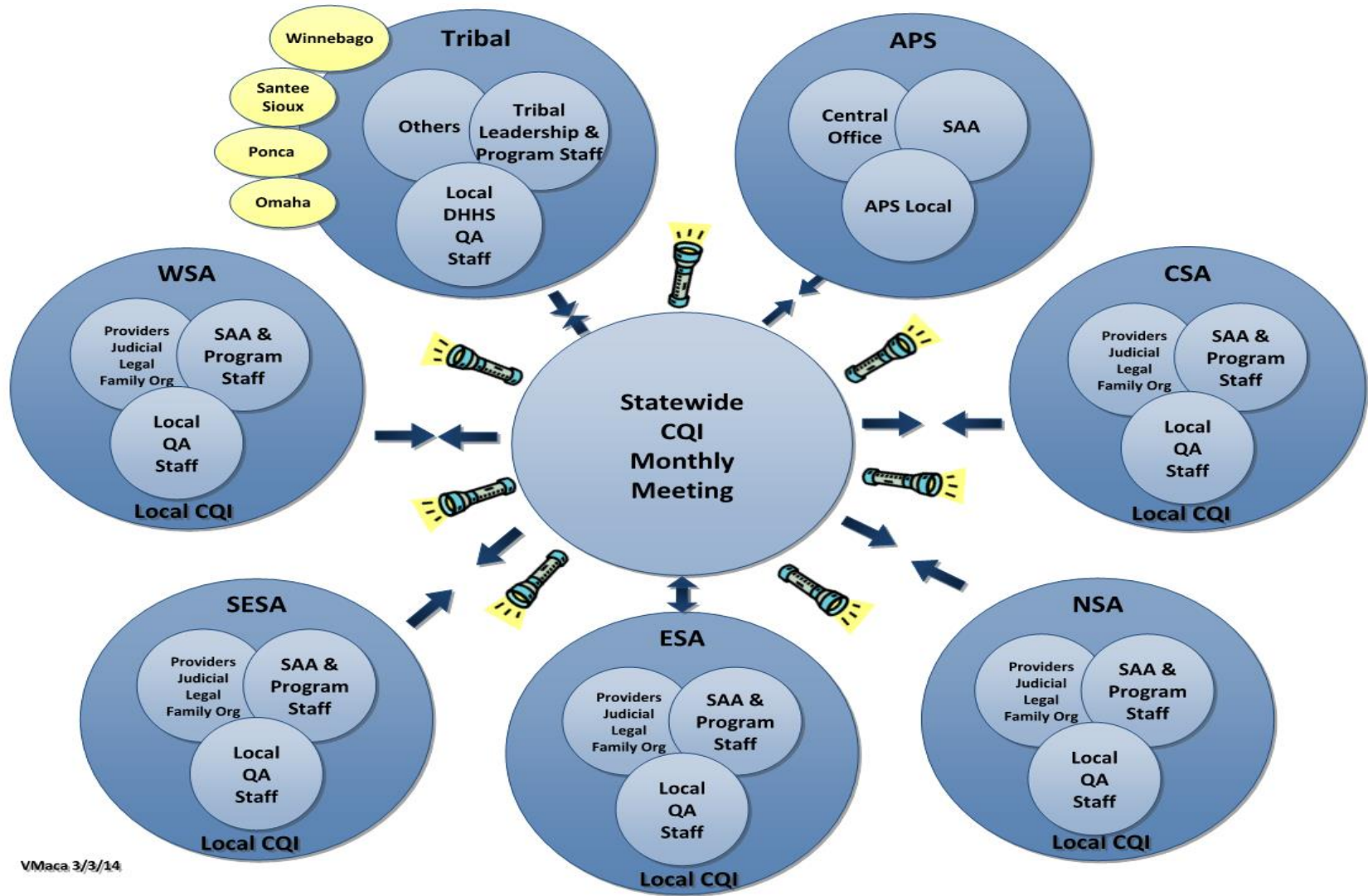
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Statewide CQI Process



Local CQI Process



Priority Outcomes/Measures

1a. Caseworker Monthly Face to Face Contact with the Child

1b. Caseworker Monthly Face to Face Contact with the Child in Out of Home Care (Federal Measure)

2. Family Team Meetings

3. Placement Documentation within 72 hours

Strengths/Opportunities:

???Are the total numbers applicable truly reflective of the youth and cases in each area??

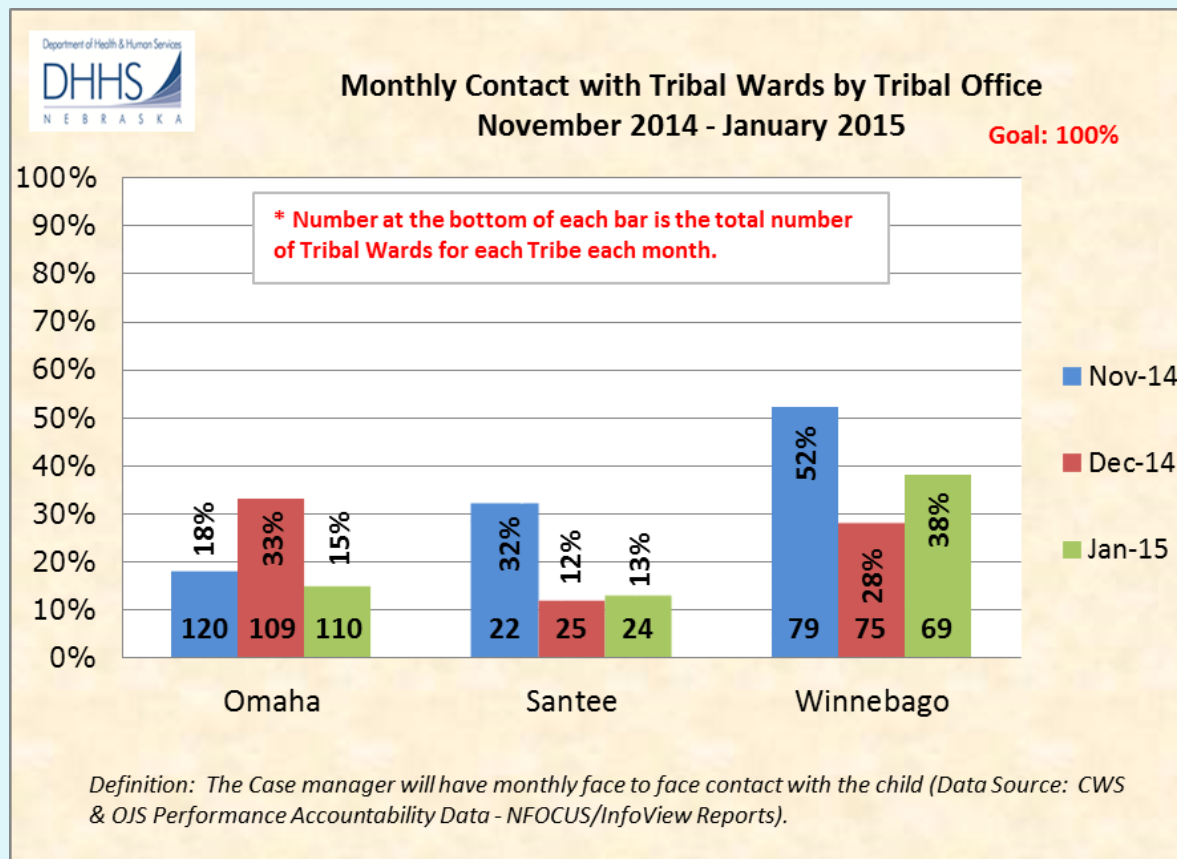
Barriers:

- Need N-FOCUS Training & updated Manual
- Lack of Staff Time/Resources
- Need to load cases that are on hard copy but have not been loaded onto N-FOCUS

Action Items:

- 1.) DHHS created a separate InfoView report folder for the tribes and provide training on how to access and utilize reports. **Done**
- 2.) DHHS created an ongoing case management due date report for tribal staff. **Done**
- 3.) DHHS Team will explore providing Dragon speak software for each tribe to help with data entry. (Dragon Speak is available now – need to set up training.)
- 4.) DHHS Team will explore the possibility of providing mentors or additional assistance to get the tribes load all cases and get caught up with getting cases loaded and documentation on N-FOCUS. (Sherri Eveleth is working on this)
- 5.) DHHS Team will identify contact person for all SDM related questions. (Contact Sherri Haber)
- 6.) DHHS Training Team will provide N-FOCUS Training for the Tribes (Contact Paulette Sombke or Brian Poppe)
- 7.) Nathan will provide a master case list for all cases that are currently open on N-FOCUS so action steps can be created to correct assignments, close cases that need to be closed etc. (Provided in November 2013 – What is the progress in cleaning up cases on N-FOCUS?)
- 8.) Sheila will share copies of Case Closure checklists for guides to close cases on N-FOCUS. Distributed in the meeting in October.
9. Loading of Cases to N-FOCUS:
 - * Decision was made that on November 1st forward all new cases voluntary and non-court will go on Nfocus right away. Intake; load CFS Case etc. Keep up to date on things that happen on those cases.
 - * Next meeting bring ideas as to what you need to get old cases on and up to date. Diversion cases need to be loaded on to N-FOCUS.
 - * Decision was made that on December 31st have ALL current/Open cases loaded and documentation entered on N-FOCUS.
 - * N-FIOCUS Assistance provided by DHHS staff in February.

Priority #1a: Caseworker Monthly Contact with the Child



Note: Documentation for activities captured for this measure must be entered on N-FOCUS on the 10th of the following month to show as completed for the month (i.e. February documentation must be entered by March 10th).

Note: Ponca Tribal Data is not included in these charts as DHHS provides case management to children and families from the Ponca Tribe.

Strengths/Opportunities:

???Are the total numbers applicable truly reflective of the youth and applicable months for each tribe??

Note: On 1/12/2015 – AFCARS Data showed the following number of youth per tribe who were either placed in out of home care or in a trial home visit and required a monthly visit from the case manager.

Omaha = 131

Santee = 18

Winnebago = 88

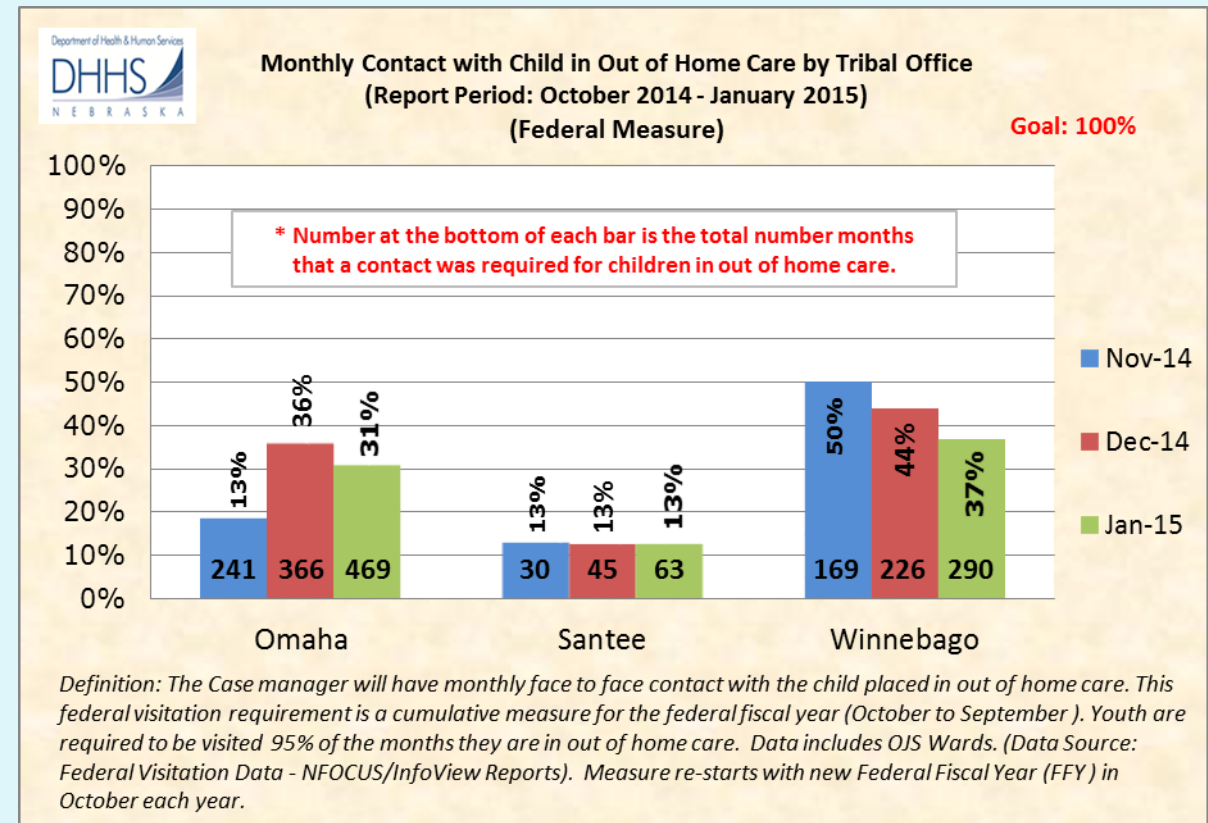
The case manager is required to contact the these children at least once a month while the children are in out of home care or involved in a trial home visit. A trial home visits is the period of time between the child's return home to his parents and the date the child is no longer a ward and the case is closed.

The case manager should verify the following for each youth:

- Is the child's placement and placement dates correct on N-FOCUS? A monthly contact is required anytime the child's legal status shows they are a ward and the placement shows the child is in out of home care AND/OR at any time while the child is on a trial home visit prior to case closure.
- Does the child's legal status reflect the correct entry and end data as a ward? A monthly contact is required for children who are wards and in out of home care or in trial home visits. If the child becomes a non-ward but the legal status is not updated, the child continues to be considered in a trial home visit and thus requiring a monthly visit with the caseworker.
- Are the face to face contacts entered for the child for each month while the child was in out of home care or in a trial home visit? It is very important that workers look at previous applicable months and enter missing documentation for contacts that actually took place with the child. The % of months visited is cumulative and will reflect documentation for all applicable month's since October 2014.

Barriers:**Action Items:**

Priority #1b: Caseworker Monthly Contact with the Child (Federal Measure)



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Strengths/Opportunities:

???Are the total numbers applicable truly reflective of the youth and cases in each area??

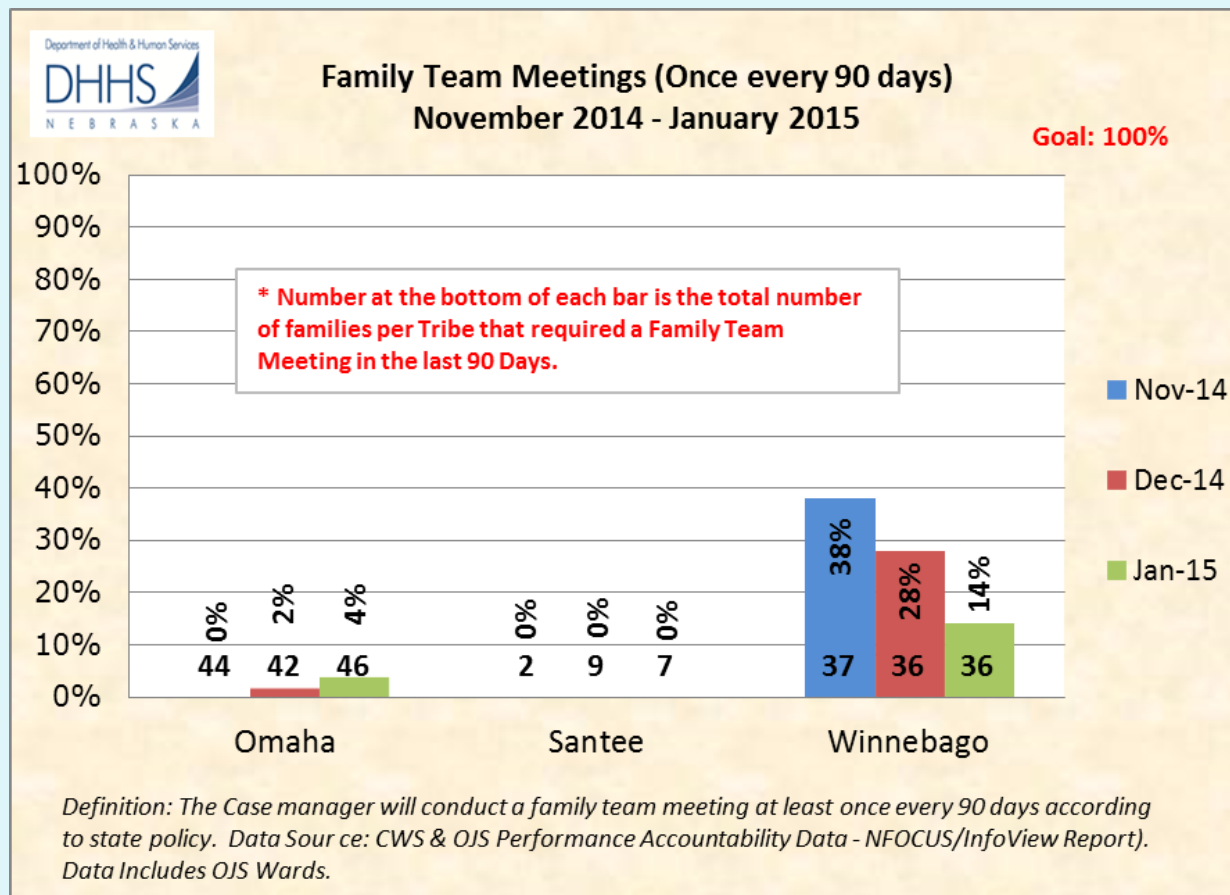
Barriers:

- Need N-FOCUS Training & updated Manual
- Lack of Staff Time/Resources
- Need to load cases that are on hard copy but have not been loaded onto N-FOCUS

Action Items:

- 1.) DHHS created a separate InfoView report folder for the tribes and provide training on how to access and utilize reports. **Done**
- 2.) DHHS created an ongoing case management due date report for tribal staff. **Done**
- 3.) DHHS Team will explore providing Dragon speak software for each tribe to help with data entry. **(Dragon Speak is available now – need to set up training.)**
- 4.) DHHS Team will explore the possibility of providing mentors or additional assistance to get the tribes load all cases and get caught up with getting cases loaded and documentation on N-FOCUS. **(Sherri Eveleth is working on this)**
- 5.) DHHS Team will identify contact person for all SDM related questions. **(Contact Sherri Haber)**
- 6.) DHHS Training Team will provide N-FOCUS Training for the Tribes **(Contact Paulette Sombke or Brian Poppe)**
- 7.) Nathan will provide a master case list for all cases that are currently open on N-FOCUS so action steps can be created to correct assignments, close cases that need to be closed etc. **(Provided in November 2013 – What is the progress in cleaning up cases on N-FOCUS?)**
- 8.) Sheila will share copies of Case Closure checklists for guides to close cases on N-FOCUS. **Distributed in the meeting in October.**
9. Loading of Cases to N-FOCUS:
 - * Decision was made that on November 1st forward all new cases voluntary and non-court will go on Nfocus right away. Intake; load CFS Case etc. Keep up to date on things that happen on those cases.
 - * Next meeting bring ideas as to what you need to get old cases on and up to date. Diversion cases need to be loaded on to N-FOCUS.
 - * Decision was made that on December 31st have ALL current/Open cases loaded and documentation entered on N-FOCUS. Brian and Paulette coming on October 30th and 31st to train the staff in Omaha and Winnebago.
- Bring to next meeting diversion the number of (non-court) case numbers that you know of.**
- 10.) DHHS Team will gather FTM guides and templates and email to this team. **(FTM Guides were shared during the Oct Meeting).**
11. DHHS Team will provide FTM Training for Staff **(Contact Paulette Sombke)**

Priority #2: Family Team Meetings



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Strengths/Opportunities:

???Are the total numbers applicable truly reflective of the youth and cases in each area???

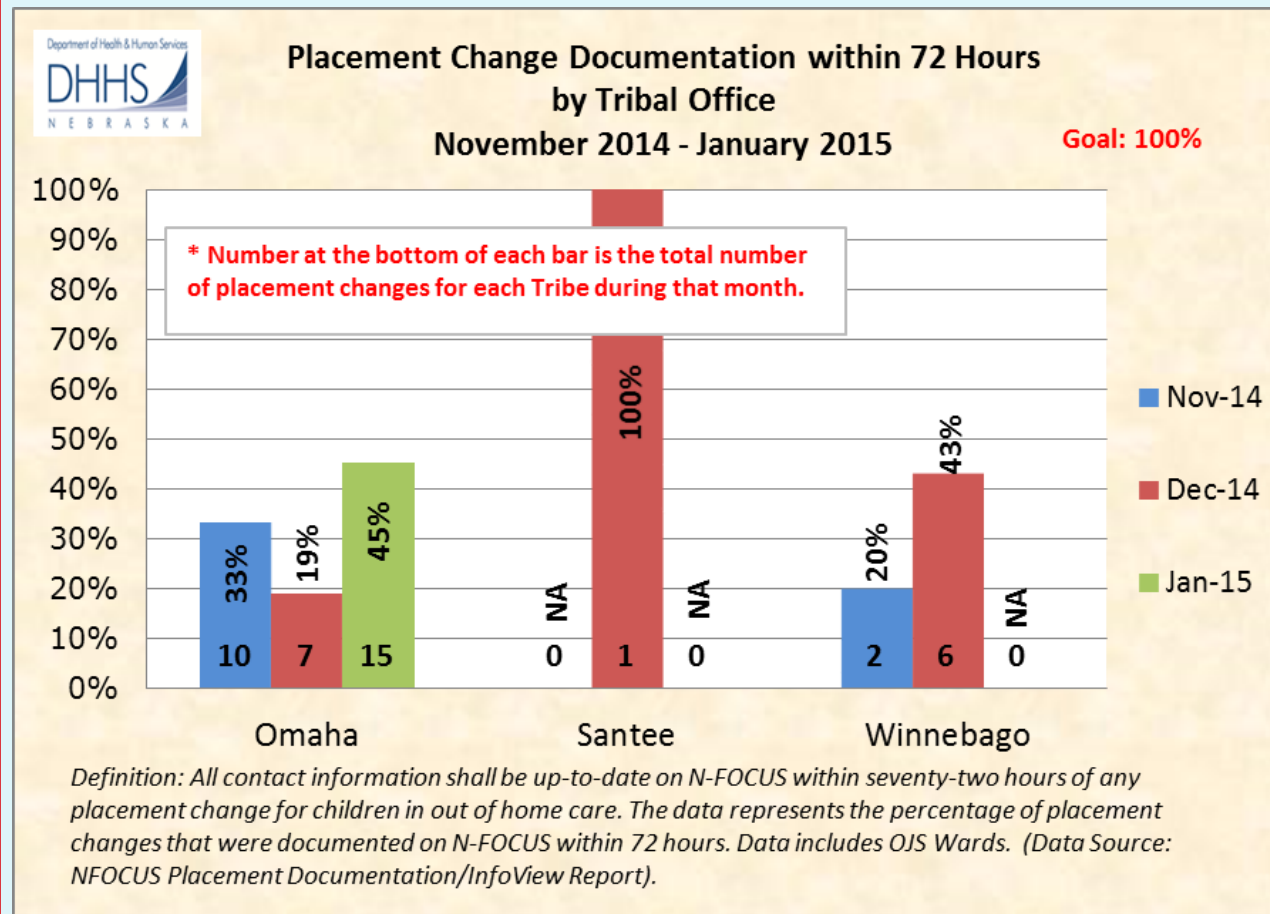
Barriers:

- Need N-FOCUS Training & updated Manual
- Lack of Staff Time/Resources
- Need to load cases that are on hard copy but have not been loaded onto N-FOCUS

Action Items:***Planned:**

- 1.) DHHS will create a separate InfoView report folder for the tribes and provide training on how to access and utilize reports. **Done**
- 2.) DHHS will create an ongoing case management due date report for tribal staff. **Done**
- 3.) DHHS Team will explore the possibility of providing mentors or additional assistance to get the tribes load all cases and get caught up with getting cases loaded and documentation on N-FOCUS. **(Sherri Eveleth is working on this).**
- 4.) DHHS Training Team will provide N-FOCUS Training and placement documentation instructions for the Tribes. **(Contact Paulette Sombke & Brian Poppe)**

Priority #3: Placement Documentation within 72 Hours



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Other Measures

- 1. IA Not Finalized**
- 2. Priority Contact Timeframes**
- 3. Case Plans within 60 Days**

Strengths/Opportunities:

- **There are 213 IA's not finalized for all tribes combined as of 09/30/2014.**
 - This measure includes all assessments not finalized past 30 days after the intake closure date.
 - The following must be completed in order for the IA to be considered finalized:
 - A finalized Safety Assessment must be tied to the intake.
 - Risk Assessment must be in Final Status.
 - Finding(s) must be entered for all Allegations.

Barriers:

Action Items:

Initial Assessments Not Finalized

As of 02/17/2015

As of Feb. 17, 2015						
Count of INTAKE NBR		LOC SVC ▾	ASGN OFF ▾			
		Tribal	Tribal Total Grand Total			
YEAR RECEIVED	MONTH RECEIVED	MACY	SANTEE TRII	WINNEBAGO	TRIBE-NEBR	
2015	January	2	1	1	4	4
2015 Total		2	1	1	4	4
2014	December	3	2	4	9	9
	November	5	2	1	8	8
	October	8	2	2	12	12
	September	8	5	1	14	14
	August	2	2	4	8	8
	July	2	0	3	5	5
	June	6	1	3	10	10
	May	4	1	4	9	9
	April	9	4	4	17	17
	March	4	0	5	9	9
	February	4	1	3	8	8
	January	8	2	1	11	11
2014 Total		63	22	35	120	120
Grand Total		65	23	36	124	124

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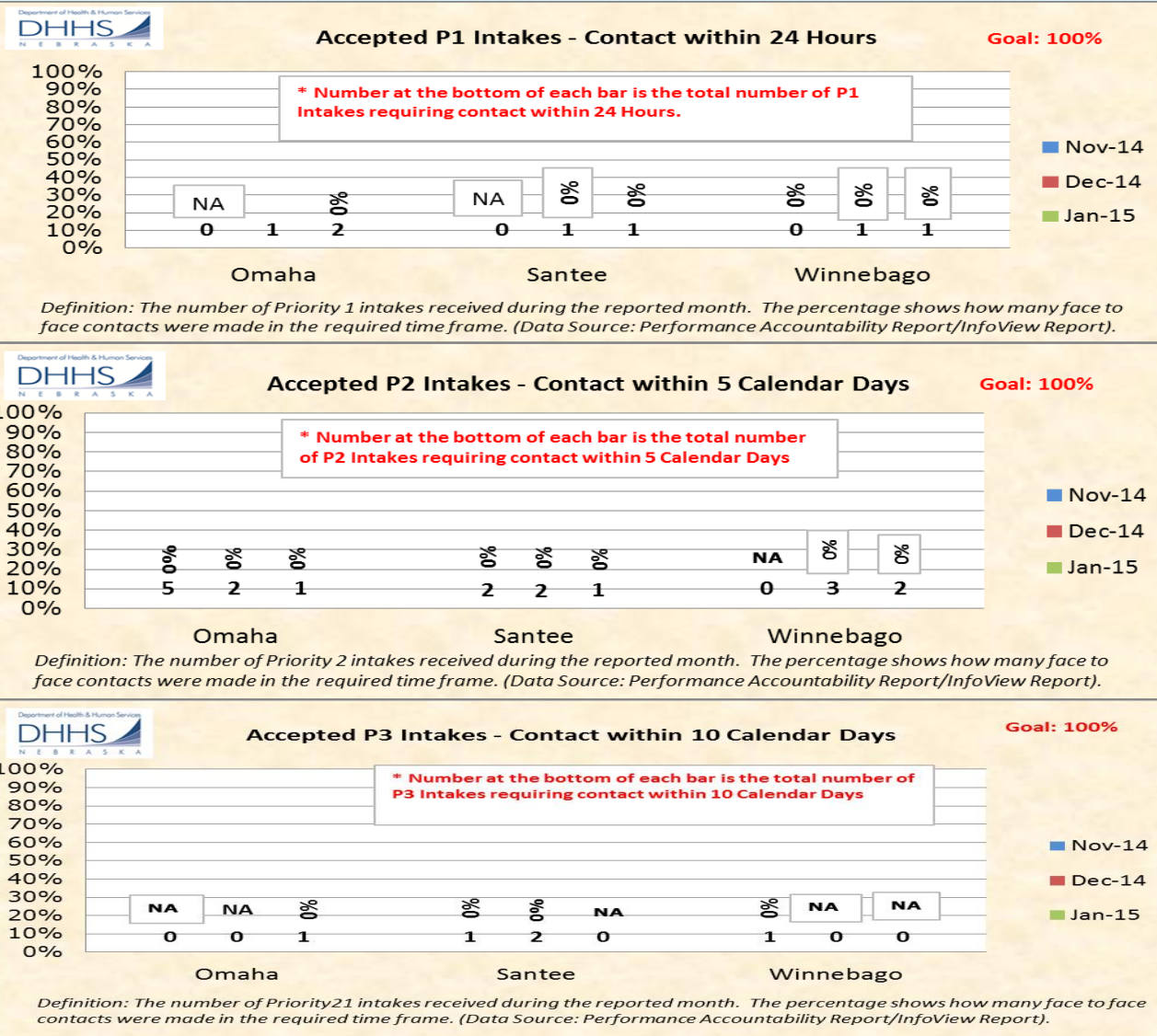
Strengths/Opportunities:

Barriers:

Action Items:

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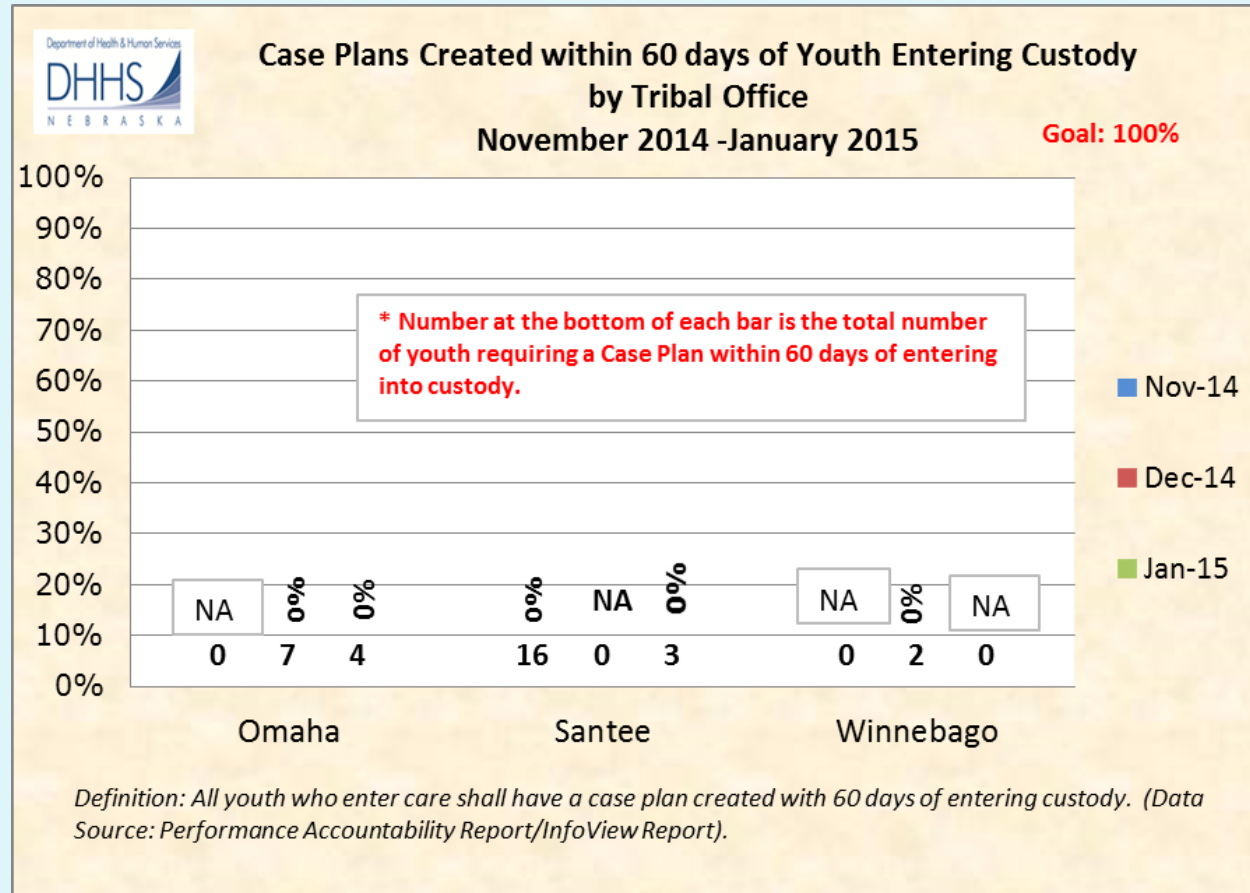
Priority Contact Timeframes



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Strengths/Opportunities:Barriers:Action Items:

Case Plans within 60 Days



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Note: Ponca Tribal Data is not included in these charts as DHHS provides case management to children and families from the Ponca Tribe.

Prepared by:

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